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11/21/95



FEE AUTHORIZATION /AMENDMENT TRANSMITTAL LETTER				Attorney's Docket No: A-169-CIP-C3	
Serial No. 08/397,320		Filing Date 3/2/95		Examiner Scheiner, L.	
In Re Application of Metalloproteinase Inhibitor		Group Art Unit 1813			

TO THE ASSISTANT COMMISSIONER OF PATENTS:

☒ Applicant(s) petition(s) for the following extension of time under 37 C.F.R. 1.136(a):

☐ One month of original due date (\$110.00)

☐ Two months of original due date (\$380.00)

☒ Three months of original due date (\$900.00)

☐ Four months of original due date (\$1,400.00)

☒ A response in connection with the matter for which this extension is requested:

☒ is filed herewith.

☐ The response is the filing of a continuation application having an express abandonment conditioned on the granting of a filing date to the continuing application.

☒ The accompanying papers include amended claims for which no additional fee is required.

☐ The accompanying papers include amended claims the fee for which has been calculated as follows:

CLAIMS AS AMENDED						
(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) No. of extra claims present	(6) Rate	(7) Additional Fee
Total Claims		Minus	=		x \$22	=
Indep. Claims		Minus	=		x \$78	=
Total Additional Fee for this Amendment						

*If the entry in column 2 is less than the entry in column 4, write "0" in column 5.
 **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☒ The following other fees are incurred by the accompanying papers.

☒ Fee Pursuant to 37 CFR 1.17(r) - \$750.00

Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of **\$ 1,650.00**. A duplicate copy of this petition is attached.

☒ If an additional extension of time is required, please consider this a petition therefore.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.

Please Send Future Correspondence To:
 U.S. Patent Operations/KMP
 M/S 10-1-B
 AMGEN INC.
 Amgen Center
 1840 Dehavilland Drive
 Thousand Oaks, California 91320-1789

Karol M. Pessin
 Karol M. Pessin
 Attorney/Agent for Applicant(s)
 Registration No. 34,899
 Phone: (805) 447-2193
 Date: October 27, 1995

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Date of Deposit October 27, 1995

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

ELLEN J. SORENSEN

Printed Name

Ellen Sorensen
Signature

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Fee Transmittal & Extension



FEE AUTHORIZATION /AMENDMENT TRANSMITTAL LETTER				Attorney's Docket No: A-169-CIP-C3	
Serial No. 08/397,320		Filing Date 3/2/95		Examiner Scheiner, L.	
In Re Application of Metalloproteinase Inhibitor		Group Art Unit 1813			
TO THE ASSISTANT COMMISSIONER OF PATENTS:					
<input checked="" type="checkbox"/> Applicant(s) petition(s) for the following extension of time under 37 C.F.R. 1.136(a): <div style="margin-left: 20px;"> <input type="checkbox"/> One month of original due date (\$110.00) <input type="checkbox"/> Two months of original due date (\$380.00) <input checked="" type="checkbox"/> Three months of original due date (\$900.00) <input type="checkbox"/> Four months of original due date (\$1,400.00) </div> <input checked="" type="checkbox"/> A response in connection with the matter for which this extension is requested: <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> is filed herewith. <input type="checkbox"/> The response is the filing of a continuation application having an express abandonment conditioned on the granting of a filing date to the continuing application. <input checked="" type="checkbox"/> The accompanying papers include amended claims for which no additional fee is required. <input type="checkbox"/> The accompanying papers include amended claims the fee for which has been calculated as follows: </div>					
CLAIMS AS AMENDED					
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Total Claims		Minus	=		x \$22 =
Indep. Claims		Minus	=		x \$78 =
Total Additional Fee for this Amendment					
<p>*If the entry in column 2 is less than the entry in column 4, write "0" in column 5.</p> <p>**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.</p> <p>***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.</p> <input checked="" type="checkbox"/> The following other fees are incurred by the accompanying papers. <div style="margin-left: 40px;"> <input checked="" type="checkbox"/> Fee Pursuant to 37 CFR 1.17(r) - \$750.00 </div> <p>Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of \$ 1,650.00. A duplicate copy of this petition is attached.</p> <input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a petition therefore. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.					
<u>Please Send Future Correspondence To:</u> U.S. Patent Operations/KMP M/S 10-1-B AMGEN INC. Amgen Center 1840 Dehavilland Drive Thousand Oaks, California 91320-1789			<div style="text-align: right;"> Karol M. Pessin Attorney/Agent for Applicant(s) Registration No.: 34,899 Phone: (805) 447-2193 Date: October 27, 1995 </div>		

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ELLEN J. SORENSEN

Printed Name

Signature